PTO/SB/05 (11/00)
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Under the			to a collection of information unless it displays a valid OMB control number.						
UTILITY			Attorney Docket No. 16615						
PATENT APPLICATION			First Inventor or Application Identifier Lorenzo Parrini						
TRANSMITTAL			Title Reinforced Synthetic Cable for Elevators						
Only for new nonprovisional applications under 37 CFR 1.53(b)			Express Mail Label No. EV 329824625 US						
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents			MAIL STOP PATENT APPLICATION Commissioner for Patents ADDRESS TO: P. O. Box 1450 Alexandria, VA 22313-1450 O						
1. × *Fe	ee Transmittal Form (e.g., PTO/SB/17) ubmit an original, and a duplicate for fee processing)	7.	Q	CD-ROM or CD-R in duplicate, large Computer Program (Appen					
	plicant claims small entity status. 22 27 CFR 1.27)	8.		Nucleotide and/or Amino Acid Sequen (if applicable, all necessary)	nce Submission				
	pecification [Total Pages12	_l		a. Computer Readable Form (b. Specification Sequence Listing ci. CD-ROM or CD-R (2) ii. Paper c. Statement verifying identity	CCRF) on: 2 copies); or				
_	Statement Regarding Fed sponsored R&D		c. Statement verifying identity of above copies ACCOMPANYING APPLICATION PARTS						
_	Reference to sequence listing, a table, or a computer program listing appendix	-	_						
	Background of the Invention Brief Summary of the Invention Brief Description of the Drawings (if filed)	9. 10.		Assignment Papers (cover sheet & doc 37 CFR §3.73(b) Statement (when there is an assignee)	Power of Attorney				
	Detailed Description	11.		English Translation Document (if apple	licable).				
4. X Dra	Claim(s) Abstract of the Disclosure awing(s) (35 USC 113) [Total Sheets4	12.		Information Disclosure Statement (IDS)/PTO-1449	Copies of IDS Citations				
		13.		Preliminary Amendment					
5. Oath or l	Declaration [Total Pages2 Newly executed (original or copy)] 14.	X	Return Receipt Postcard (MPEP 503) (Should be specifically itemized)					
b.	Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 complete	15. ted)		Certified Copy of Priority Document(s (if foreign priority is claimed)	s)				
	[Note Box 5 below]	16.		Request and Certificate under 35 U.S. Applicant must attach Form PTO/SB/3					
	DELETION OF INVENTORS	17.		Other:	•				
_	 i. Signed statement attached deleting inventor(s) named in the prior application, CFR §§ 1.63(d)(2) and 1.33(b). 								
6. Ap	plication Data Sheet. See 37 CFR 1.76								
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment: Continuation Divisional Continuation-in-part (CIP) Prior application information: Examiner Group/Art Unit For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be									
relied upon when a portion has been inadvertently omitted from the submitted application parts.									
	19. CORRES	PONDENC	L A						
⊠ Cu	stomer Number or Bar Code Label	04859 NT TRADEMARK OF	FICE	or 🔲 Corresponden	ce address below				
Name	William J. Clemens, Esq.								
Address									
City		14540 0000	-	Zip Code	724/542 05/0				
		34/542-0900	-	Registration No. (Attorney/Agent)	734/542-9569				
Name (print/type) William J. Clemens									
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United States "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Mail Stop Patent Application, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 223431450

Terri L. Fox

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Complete if known **FEE TRANSMITTAL** Application Number For FY 2003 Filing Date Effective 01/01/2003. Patent fees are subject to annual revision. First Named Inventor Lorenzo Parrini Applicant claims small entity status. See 37 CFR 1.27 **Examiner Name** Group/Art Unit TOTAL AMOUNT OF PAYMENT (\$ 810 Attorney Docket No. 16615

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)								
☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None	3.	ADDITI	ONAL FE	ES					
☑ Deposit Account:	Large	Entity	Small	Entity	•				
Deposit Account.	Fee	Fee	Fee	Fee					
Deposit	Code	(\$)	Code	(\$)	Fee Descripti		Fee Paid		
Acct. No. 13-0005	1051 1052	130	2051	65	Surcharge - late f				
Deposit		50	2052	25		provisional filing			
Acct, Name MacMillan, Sobanski, & Todd, LLC					fee or cover shee				
The Commissioner is authorized to: (Check all that apply)		130	1053	130	Non-English spec				
☐ Charge fee(s) indicated below ☐ Credit any overpayments		2,520	1812	2,520	For filing a reque	est for <i>ex parte</i>			
☑ Charge any additional fee(s) during the pendency of this action					reexamination				
☐ Charge fee(s) indicated below, except the filing fee, to the		920*	1804	920*		cation of SIR prior			
above-identified deposit account.					to Examiner action				
		1,840*	1805	1,840*		lication of SIR after			
FEE CALCULATION					Examiner action				
	1251	110	2251	55	Extension for rep	ly within 1st month			
1. BASIC FILING FEE	1252	420	2252	210	Extension for rep	ly within 2 nd month			
	1253	950	2253	475	Extension for rep	ly within 3 rd month			
Large Entity Small Entity	1254	1,480	2254	740		ly within 4th month			
Fee Fee Fee Fee Description Fee Paid	1255	2,010	2255	1,005		ly within 5 th month			
Code (\$) Code (\$)	1401	330	2401	165	Notice of Appeal				
1001 770 2001 385 Utility filing fee	1402	330	2402	165		upport of an appeal			
1002 340 2002 170 Design filing fee	1403	290	2403	145	Request for oral l				
1003 530 2003 265 Plant filing fee	1451	1,510	1451	1,510	Petition to institu	ite a public use			
1004 770 2004 385 Reissue filing fee					proceeding				
1005 160 2005 80 Provisional filing fee	1452	110	2452	55	Petition to revive				
	1453 1501	1,330	2453	665	Petition to revive				
SUBTOTAL (1) \$ 770		1,330	2501	665	Utility issue fee (or reissue)			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		480	2502	240	Design issue fee Plant issue fee				
Fee from	1503 1460	640	2503	320 130		·			
Extra Below Fee Paid		130	1460	50	Petitions to the C				
Total Claims <u>15</u> 20** = <u>0</u> <u>18/9</u> =		50	1807	30	Petitions related applications	to provisionai			
Independent Claims $3 3** = 0 x 86/43 = $	1806	180	1806	180	Submission of In	formation			
Multiple Dependent x <u>290/145</u> =	1800	100	1800	180	Disclosure Stater				
	8021	40	8021	40		nem patent assignment per			
Large Entity Small Entity	8021	40	8021	40		number of properties)	40		
Fee Fee Fee Fee Description	1809	770	2809	385		on after final rejection			
Code (\$) Code(\$)	1007	770	2009	363	(37 CFR 1.129(a		•		
	1810	770	2810	385		nal invention to be			
1202 18 2202 9 Claims in excess of 20	1010	770	2010	505	examined (37 CF				
1201 86 2201 43 Independent claims in excess of 3	1801	770	2801	385		inued Examination			
1203 290 2203 145 Multiple dependent claim, if not paid	1802	900	1802	900		dited examination			
1204 86 2204 43 **Reissue independent claims over	.002	,,,,	1002	,,,,	of a design appli				
original patent									
1205 18 2205 9 **Reissue claims in excess of 20 and	Other	fee (specif	v)						
over original patent	Other fee (specify)								
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** or number previously paid, if greater; for Reissues, see above			J	\$	40				
or number previously paid, if greater, for Keissues, see above		SUBTOTAL (3) \$							
SUBMITTED BY						Complete (if applicable			
Typed or						Dog No	26,855		
Printed Name William J. Clemens						Reg. No. Deposit Account	20,833		
Signature William Winners				Doto Ma	vember 20, 2003	User ID			
Signature William X VIII				Date NO	veniuci 20, 2003	OSCIID			

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This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450.